



**GEORGIA MEDICAID FEE-FOR-SERVICE
TYROSINE KINASE INHIBITORS (TKI) FOR THYROID CANCER PA
SUMMARY**

Preferred	Non-Preferred
Cometriq (cabozantinib) Lenvima (lenvatinib) Nexavar (sorafenib)*	Caprelsa (vandetanib)

*PA not required

LENGTH OF AUTHORIZATION: 1 Year

NOTE: Prior authorization (PA) is not required for Nexavar.

PA CRITERIA:

Caprelsa

- ❖ Approvable for members with a diagnosis of symptomatic or progressive medullary thyroid cancer that is unresectable locally advanced or metastatic.
- ❖ Prescriber and pharmacy must be enrolled in the Caprelsa REMS program.

Cometriq

- ❖ Approvable for members with a diagnosis of symptomatic or progressive medullary thyroid cancer that is unresectable locally advanced or metastatic.

Lenivma

- ❖ Approvable for members with a diagnosis of locally recurrent or metastatic differentiated thyroid cancer that is progressive and refractory to radioactive iodine therapy.
- ❖ Approvable when used in combination with everolimus (Afinitor) for members with a diagnosis of advanced renal cell carcinoma (kidney cancer) whose cancer has relapsed or is in stage IV, is surgically unresectable and cell histology is predominantly clear

AND

- ❖ Member has progressed or relapsed after therapy with axitinib (Inlyta), pazopanib (Votrient), sorafenib (Nexavar) or sunitinib (Sutent).

EXCEPTIONS:

- ❖ Exceptions to these conditions of coverage are considered through the prior authorization process.
- ❖ The Prior Authorization process may be initiated by calling **OptumRx at 1-866-525-5827**.

PREFERRED DRUG LIST:

- ❖ For online access to the Preferred Drug List (PDL), please go to <http://dch.georgia.gov/preferred-drug-lists>.



PA and APPEAL PROCESS:

- ❖ For online access to the PA process, please go to <http://dch.georgia.gov/prior-authorization-process-and-criteria> and click on Prior Authorization (PA) Request Process Guide.

QUANTITY LEVEL LIMITATIONS:

- ❖ For online access to the Quantity Level Limits (QLL), please go to <https://www.mmis.georgia.gov/portal>, highlight Provider Information and click on Provider Manuals. Scroll to the page with Pharmacy Services and select that manual.